WAUKESHA SPRINGS HLTH & REHAB CTR

1810 KENSINGTON DR

WAUKESHA 53188 Phone: (262) 548-1400)	Ownership:	Non-Profit Corporation
Operated from 1/1 To 12/31 Days of Operation:	366	Highest Level License:	Skilled
Operate in Conjunction with Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds Set Up and Staffed (12/31/04):	195	Title 18 (Medicare) Certified?	Yes
Total Licensed Bed Capacity (12/31/04):	195	Title 19 (Medicaid) Certified?	Yes
Number of Residents on 12/31/04:	162	Average Daily Census:	162

Services Provided to Non-Residents		Age, Gender, and Primary Di	agnosis	of Residents (1	12/31/04)	Length of Stay (12/31/04)	%
Home Health Care	No	 Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	54.9
Supp. Home Care-Personal Care	No					1 - 4 Years	21.6
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	9.3	More Than 4 Years	23.5
Day Services	No	Mental Illness (Org./Psy)	16.7	65 - 74	9.3		
Respite Care	No	Mental Illness (Other)	9.9	75 - 84	38.9		100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	30.2	*********	*****
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	4.3	95 & Over	12.3	Full-Time Equivalent	
Congregate Meals	No	Cancer	3.1			Nursing Staff per 100 Res	idents
Home Delivered Meals	No	Fractures	12.3	İ	100.0	(12/31/04)	
Other Meals	No	Cardiovascular	25.9	65 & Over	90.7		
Transportation	No	Cerebrovascular	13.6			RNs	9.9
Referral Service	No	Diabetes	7.4	Gender	%	LPNs	13.3
Other Services	No	Respiratory	5.6			Nursing Assistants,	
Provide Day Programming for		Other Medical Conditions	1.2	Male	27.2	Aides, & Orderlies	44.2
Mentally Ill	No			Female	72.8		
Provide Day Programming for			100.0				
Developmentally Disabled	No				100.0		
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Method of Reimbursement

		Medicare 'itle 18			edicaid itle 19		Other			Private Pay			Family Care			Managed Care				
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Tota Resi- dent	- Of
Int. Skilled Care	0	0.0	0	12	8.9	156	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	12	7.4
Skilled Care	14	100.0	357	120	88.9	134	0	0.0	0	13	100.0	190	0	0.0	0	0	0.0	0	147	90.7
Intermediate				3	2.2	112	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	3	1.9
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	i 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	14	100.0		135	100.0		0	0.0		13	100.0		0	0.0		0	0.0		162	100.0

WAUKESHA SPRINGS HLTH & REHAB CTR

Admissions, Discharges, and		Percent Distribution	n of Residents'	Condit	ions, Services, an	d Activities as of 12/	31/04					
Deaths During Reporting Period			% Modding									
					% Needing		Total					
Percent Admissions from:		Activities of	8		sistance of		Number of					
Private Home/No Home Health	5.7	Daily Living (ADL)	Independent	One	e Or Two Staff	-	Residents					
Private Home/With Home Health	0.0	Bathing	4.9		81.5	13.6	162					
Other Nursing Homes	4.6	Dressing	9.3		72.8	17.9	162					
Acute Care Hospitals	87.1	Transferring	30.9		58.0	11.1	162					
Psych. HospMR/DD Facilities	0.0	Toilet Use	16.7		62.3	21.0	162					
Rehabilitation Hospitals	0.0	Eating	70.4		23.5	6.2	162					
Other Locations	2.6	******	******	*****	*****	******	*****					
otal Number of Admissions	194	Continence		%	Special Treatmen	ts	%					
ercent Discharges To:		Indwelling Or Extern	nal Catheter	6.8	Receiving Resp	iratory Care	8.6					
Private Home/No Home Health	26.8	Occ/Freq. Incontiner	nt of Bladder	57.4	Receiving Trac	heostomy Care	0.0					
Private Home/With Home Health	16.3	Occ/Freq. Incontine	nt of Bowel	48.1	Receiving Suct	ioning	0.6					
Other Nursing Homes	6.3	_			Receiving Osto	my Care	5.6					
Acute Care Hospitals	10.5	Mobility			Receiving Tube	Feeding	3.1					
Psych. HospMR/DD Facilities	0.5	Physically Restraine	ed	1.2	Receiving Mech	anically Altered Diets	25.3					
Rehabilitation Hospitals	0.0				3	•						
Other Locations	8.9	Skin Care			Other Resident C	haracteristics						
Deaths	30.5	With Pressure Sores		5.6	Have Advance D	irectives	86.4					
otal Number of Discharges		With Rashes		1.9	Medications							
(Including Deaths)	190			,	Receiving Psyc	hoactive Drugs	75.3					

Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

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		Own	ership:	Bed	Size:	Lic	ensure:		
	This	Non	profit	100	-199	Ski	lled	Al	1
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci	lities
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	83.1	87.4	0.95	86.5	0.96	87.3	0.95	88.8	0.94
Current Residents from In-County	95.7	86.8	1.10	87.0	1.10	85.8	1.11	77.4	1.24
Admissions from In-County, Still Residing	44.8	21.8	2.06	18.9	2.37	20.1	2.24	19.4	2.31
Admissions/Average Daily Census	119.8	159.1	0.75	188.2	0.64	173.5	0.69	146.5	0.82
Discharges/Average Daily Census	117.3	159.6	0.73	190.4	0.62	174.4	0.67	148.0	0.79
Discharges To Private Residence/Average Daily Census	50.6	63.2	0.80	77.5	0.65	70.3	0.72	66.9	0.76
Residents Receiving Skilled Care	98.1	96.1	1.02	95.9	1.02	95.8	1.02	89.9	1.09
Residents Aged 65 and Older	90.7	96.5	0.94	90.5	1.00	90.7	1.00	87.9	1.03
Title 19 (Medicaid) Funded Residents	83.3	50.4	1.66	56.3	1.48	56.7	1.47	66.1	1.26
Private Pay Funded Residents	8.0	33.2	0.24	22.2	0.36	23.3	0.34	20.6	0.39
Developmentally Disabled Residents	0.0	0.5	0.00	1.1	0.00	0.9	0.00	6.0	0.00
Mentally Ill Residents	26.5	33.9	0.78	29.0	0.91	32.5	0.82	33.6	0.79
General Medical Service Residents	1.2	26.1	0.05	25.4	0.05	24.0	0.05	21.1	0.06
Impaired ADL (Mean)	43.8	51.2	0.86	52.6	0.83	51.7	0.85	49.4	0.89
Psychological Problems	75.3	62.3	1.21	55.4	1.36	56.2	1.34	57.7	1.31
Nursing Care Required (Mean)	6.3	7.1	0.90	7.7	0.83	7.7	0.82	7.4	0.85